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Substitute for Form PTO-875									1060SS 48		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN	
FOR		NUMB	NUMBER FILED		NUMBER EXTRA		RATE	3,35		RATE	770
	IC FEE CFR 1.16(a))							s	OR	10,12	s
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 =		. 36		s =		OR	x \$ =	7 -
IND	EPENDENT CLAI	MS	minus 3 =		2		s =		OR	x s =	1
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									OR		1
								-/-		+\$=	-
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	$\leftarrow$	OR	TOTAL	LL
	С	LAIMS AS AM	ENDED	- PART II							
2,	1.	(Column 1)	<b>.</b>	(Column 2)	(Column 3)	_	SMALL E	NTITY	OR	LOTHE! SMALL	R THAN ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TKONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))	36	Minus	"36	=	х	<u>s 25 = </u>		OR	x \$ <u>50</u> =	1
	Independent (37 CFR 1.16(b))	2	Minus	<sup></sup> 2	=	x	<u>s_/0C</u> =		OR	x s <u>200</u> =	
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						\$ =		OR	+\$ =	
							OTAL DD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			τ			7
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	44	Ε	х	s 25 =		OR	x \$ <u>5</u> 0 =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	х	s_/ <i>0</i> 0 =		OR	x s <u>200</u> =	
₽	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						s =		OR	+\$ =	
							DTAL DD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											<u> </u>
AMENDMENT C		CLAIMS REMAINING		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x	<u>\$25                                    </u>		OR	x \$ 50 =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=		s <u>/00</u> =		OR	x \$ 200 =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						s =		OR	+ s =	
							TAL DD'L FEE		OR	TOTAL ADD'L FEE	
•	If the "Highest I If the "Highest I	olumn 1 is less tha Number Previously Number Previously	Paid For	IN THIS SPACE IN THIS SPACE I	is less than 20, or is less than 3, er	3. enter "2 nter "3".	o <b>"</b> .		J.,		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.